




U.S. Department of Justice
Federal Bureau of Prisons

Health Services Division

Washington, D.C. 20534

DEC 20 2021

MEMORANDUM FOR CHIEF EXECUTIVE OFFICERS

FROM: 
M. D. Smith, Assistant Director
Health Services Division

SUBJECT: Waiver to Health Services policy

This is national policy waiver to Health Services Program Statement 6031.04, Patient Care, due to the ongoing COVID-19 pandemic. With the issuance of the COVID-19 Operational Matrix and Guidance on August 16, 2021, this waiver will rescind and replace previously issued waivers dated June 30, 2021, and July 2, 2021. This waiver provides extension of the timeframes required to complete admission and orientation medical examinations as well as chronic care clinic examinations.

6031.04 Patient Care Program Statement states:

15. Chronic Care Clinics

Chronic Care Clinics (CCCs) are a means for inmates with ongoing medical needs to be tracked and seen by a health care provider at clinically appropriate intervals. A physician will see all inmates assigned to a CCC every 12 months, or more often if clinically indicated.

18. Intake Screening

Initially examine all new arrivals from other institutions that have a CCC assignment, within 14 days of arrival, to establish a treatment plan and follow-up intervals appropriate for the inmate's medical needs.

19a. Short-Term Examination

For individuals in predictably short-term custody (FDCs/MCCs/ MDCs/Jails), an initial screening physical examination to determine medical needs will be done within 14 days of admission on the appropriate physical examination form.

19b. Long-Term Examination

For individuals in predictably long-term incarceration (sentenced/designated), an initial complete physical examination to determine medical needs will be done within 14 days of admission on the appropriate examination forms.

Response to requests for policy waiver:

Due to the COVID-19 pandemic and the required medical response, the following waivers are granted to allow for training and implementation of the new COVID-19 Operational Matrix and Guidance:

- Required annual chronic care visits have an additional 30 days beyond their annual "due" date, to complete the examinations for inmates who are deemed clinically appropriate for quarantine. (Reference #15 above)
- 14 day admission and orientation examinations and 14 day Chronic Care Clinics have 21 days to complete the examinations for inmates who are deemed clinically appropriate for quarantine. (Reference #18, 19a, and 19b.)

National policy waiver is granted as noted above. This waiver is effective until June 30, 2022.

cc: Ken Hyle, Assistant Director/General Counsel, OGC
Louis Milusnic, Assistant Director, PRD
RADM Chris A. Bina, SDAD, HSD
Elizabeth Stahl, Medical Director, HSD

(b)(6); (b)(7)(C)

Regional Medical Directors

(b)(6); (b)(7)(C)

Regional Health Services Administrators
HSD Branch Chiefs
HSD Chief Professional Officers
Medical Asset Support Team Members



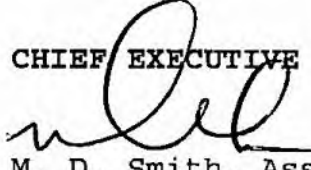
U.S. Department of Justice
Federal Bureau of Prisons

Health Services Division

Washington, D.C. 20534

July 9, 2021

MEMORANDUM FOR CHIEF EXECUTIVE OFFICERS

FROM:  M. D. Smith, Assistant Director
Health Services Division

SUBJECT: National Waiver to Health Services Policy
P6027.02

This is a national policy waiver request to Health Services policy due to the requirements of performing a National Practitioner Data Bank (NPDB) query, obtaining the Warden's signature on privileges and practice agreements, obtaining the Regional Director's concurrence specific to Clinical Director privilege applications, maintaining at least site specific privileges, and the process of Central Office tracking the credential files for Clinical Directors (CD), Chief Dental Officers (CDO), and Regional practitioners except Regional Medical Directors and Regional Chief Dentists.

Background

Program Statement P6027.02, Health Care Provider Credential Verification, Privileges, and Practice Agreement Program states:

Credential Verification, Section 2 states:

Each Health Services Unit (HSU) will ensure that professional credentials for all health care providers inside the institution are verified at the primary source (the issuer of the credential). Providers include Bureau staff, PHS staff, part-time staff, contract and consultant staff, and those who provide a diagnosis or treatment using telehealth.

(5) National Practitioner Data Bank (NPDB) inquiry initiated, completed, and renewed every two years for licensed or certified staff by the Central Office, Health Services Division. See Attachment A for NPDB queries. This form must be filled out completely and submitted to the Office of Quality Management (OQM), Health Services Division (HSD), Central Office.

c. File Maintenance.

Copies of the credential file for the CDs, CDOs, CPs [*Chief Psychiatrist*], RMD, and MAST Physicians are maintained in Central Office. At each institution where the CD, CDO, CP, RMD or MAST Physician provides patient care, a credential file will be maintained with at least site-specific privileges, current and verified license, CPE, and other training and competency documents. The professional peer review documents for these providers will be maintained in their credential file in Central Office.

Fully completed Information for Queries form is sent via e-mail to the [*BOP-HSD-Quality Management-S@bop.gov*] mail box to initiate the query for all licensed or certified Health Services staff, contractors, and in-house consultants. A new query must be completed and the information from the NPDB must be reviewed before granting initial, renewed, or revised privileges to a licensed or certified Health Services Staff, contractors and consultants at a minimum every two years.

Granting of Clinical Privileges, Practice Agreements, and Protocols, Section 3 states:

c. Authority.

Authority to grant institution-specific clinical privileges, practice agreements, and protocols is defined as follows:

(8) Each Warden is required to sign off on all privilege applications and practice agreements. This requirement does not indicate that a Warden has authority to grant these privileges or practice agreements, but rather that the Warden is aware of the terms of the privileges or agreements granted, and to whom. This procedure is required because the Warden is the institution's representative to the Health Services Governing Body.

(9) For the position of CD, the institution must seek the appropriate Regional Director's concurrence in memorandum format, prior to submitting the application for privileges, in addition to verified credentials described earlier, to the Medical Director. The Regional Director's concurrence must accompany the privilege application to the Medical Director.

Decision

The National Practitioner Data Bank (NPDB) is a web-based data bank which contains information on medical malpractice payments and certain adverse actions related to health care providers. Querying the NPDB (running a search for information from the

NPDB) is a requirement of outside accrediting agencies as well as the Federal Bureau of Prisons Health Services Division Policy.

In an effort to improve the quality of care to the inmate population as well as decrease the staff burden of multiple steps to maintain compliance with policy requirements the Federal Bureau of Prisons will transition from the current process of "One-Time Query" to "Continuous Query" through the NPDB.

The new Continuous Query process will continuously monitor and automatically notify the Office of Quality Management when a new report is received or an existing report is revised, corrected, or voided.

Effective immediately and to be completed by December 31, 2021, all healthcare practitioners in the Federal Bureau of Prisons who require monitoring by the NPDB will be transitioned to the NPDB Continuous Query Program by Central Office Health Services Division. For providers who require an NPDB report a One-Time Query within 30 days is required for new and renewed privileges, protocols, and practice agreements, unless the Continuous Query report is available in the credential file during the interim period. The initial NPDB report, which is generated upon enrollment into the Continuous Query program, will be sent to the provider's Health Services Administrator (HSA) and must be added to each individual's credential file. The Continuous Query Program will continuously monitor individuals enrolled in the program. A notification will automatically be sent from NPDB to OQM if there has been a new, revised, corrected or voided report. Any new, revised, corrected, or voided finding that is identified in the NPDB report will be reviewed by the Medical Director and a memorandum sent to the institution of the practitioner. The practitioner must respond to the memorandum and include a description of the event.

Waiver: I will approve this exemption with the following provisions:

- All health care practitioners who require a NPDB report will be transitioned to the Continuous Query Program. Once the initial Continuous Query document is added to each practitioners credential file, querying the NPDB will no longer be required (e.g. renewals, biennial, etc.).
- In the event that the Continuous Query Program alerts the Office of Quality Management to a new, revised, corrected or voided report the Medical Director or their designee will review the findings and notify the institution with further instructions. The NPDB alert report must be added to the credential file of the practitioner.

- Enrollment in the Continuous Query program will automatically renew on an annual basis. The Health Services Branch will utilize a semi-annual report of separations and retirements to ensure Continuous Queries are current.

Decision

Effective immediately, the Warden will no longer be required to sign privileges or practice agreements. Effective immediately, the Regional Director will no longer be required to concur with granting privileges to Clinical Directors.

Waiver: I will approve this exemption to no longer require the Warden to sign privileges or practice agreements. Additionally, for the position of the Clinical Director the Regional Director's concurrence will no longer be required prior to submitting the application for granting of privileges. With this exemption approval, the following delineations for privilege granting authority (PGA) will be implemented to include privileges, practice agreements, and protocols:

- The Medical Director of the Federal Bureau of Prisons (or their designee) will be the delegated governing body representative for Regional Medical Directors and Federal Bureau of Prisons Telehealth staff.
- The National Chief Dentist (or their designee) will be the delegated governing body representative for Regional Chief Dentists.
- The National Chief Psychiatrist (or their designee) will be the delegated governing body representative for the telepsychiatry cadre.
- Each Regional Medical Director will be the delegated governing body representative for Regional Quality Improvement & Infection Prevention and Control staff, Regional MAST Physicians, Regional Nurse Consultants, Regional Advanced Practice Providers, Regional Social Workers, and Clinical Directors in the region.
- Each Regional Chief Dentist will be the delegated governing body representative for Regional MAST Dentists and Chief Dental Officers in the region.
- Each institution Clinical Director/Acting Clinical Director will be the governing body representative for health care practitioners at the institution.

- Each institution Chief Dental Officer/Acting Chief Dental Officer will be the delegated governing body representative for institution dental staff.

Decision

Effective immediately, institutions will no longer be required to maintain site-specific privileges, practice agreements, and protocols for practitioners. Effective immediately all current privileges, protocols, and practice agreements will be valid at all Federal Bureau of Prisons facilities. Effective immediately, all granted privileges, practice agreements, and protocols will be valid at all Federal Bureau of Prisons facilities. Individuals who follow protocols should become familiar with local protocols as appropriate.

Waiver: I will approve this exemption to no longer require each institutions to maintain site-specific privileges, practice agreements, or protocols as described above. All health care practitioners will have and be granted privileges, practice agreements, or protocols valid at all Federal Bureau of Prisons facilities.

The Regional Medical Director will be the Acting Clinical Director when a vacancy occurs in the Clinical Director role at an institution within the region, unless delegated to a Regional MAST Physician and indicated by memorandum. When assuming the role of Acting Clinical Director the Regional Medical Director will notify the governing body of the institution by memorandum including an effective date and an end date not to exceed the appointment of a new clinical director or the current expiration date for the individual's regional privileges.

The Regional Chief Dentist will be the Acting Chief Dental Officer when a vacancy occurs in the Chief Dental Officer role at an institution within the region, unless otherwise delegated to a Regional MAST Dentist and indicated by memorandum. When assuming the role of Acting Chief Dental Officer the Regional Chief Dentist will notify the governing body of the institution by memorandum including an effective date and an end date not to exceed the appointment of a new Chief Dental Officer or the current expiration date for the individual's regional privileges.

- The Central Office - Health Services Division will track and maintain the credential files for Regional Medical Directors, Regional Chief Dentists, and Federal Bureau of Prisons Telehealth staff.
- Each Regional Office Health Services Section will track and maintain the credential files of regional clinicians except Regional Medical Directors and Regional Chief Dentists. In

addition, each Regional Office Health Services Section will track the dates of Clinical Directors and Chief Dental Officers peer review and privilege within the region. Each Regional Office Health Services Section will notify the necessary parties in advance of the expiration dates for items tracked.

- Each institution Health Services Administrator will track and maintain the credential file of the Clinical Director, Chief Dental Officer, and practitioners who are granted privileges, protocols or practice agreements by the institution Clinical Director or institution Chief Dental Officer.

This waiver is effective until June 15, 2022.

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Regional Medical Directors
Regional Health Services Administrators
Medical Asset Support Team Members
HSD Branch Chiefs
HSD Chief Professional Officers